whom is recognized by other scientists as a scientific

whom is recognized by other scientists as a scientific authority, are in error.

With, therefore, the unanimous consensus of the informed on Doctor Geiger's side, there is no reason why the Mayor and Supervisors should be disturbed by objections from a small group of the uninformed.—San Francisco Chronicle, July 11, 1932.

#### RESEARCH DEFENSE SOCIETY

#### SIR ARTHUR KEITH ON THE CONFLICT BETWEEN SENTIMENT AND REASON

RESEARCH DEFENSE SOCIETY

SIR ARTHUR KEITH ON THE CONFLICT BETWEEN

SENTIMENT AND REASON

The annual meeting of the Research Defense Society was held at the London School of Tropical Medicine on June 15, and was made the occasion of the delivery of the Stephen Paget Memorial Lecture by Sir Arthur Keith. Lord Lamington, who presided, referred in terms of deep regret to the death of Lord Knutsford, the chalirman work of the head done on behalf of the hospitals and of all who suffered. He announced that the Hon. Sir Arthur Stanley had consented to serve as chairman in Lord Knutsford's stead. No man was better known, especially for his activities on behalf of the British Red Cross Society, and his acceptance of the post was in itself a testimony to the work being done by the Research Defense Society. He pointed out that the society was engaged in defense of discoveries which would result, not only in the prevention or mittigation of human pain, but of animal medicans or mittigation of human pain, but of animal pain also, and the wire "vivision to apply in the connection of the activities engaged in brutalized the nature. For not the activities engaged in brutalized the nature. For not the activities engaged in scientific research—in physics, chemistry, geology, and botany—experimental work was not impeded by considerations of sentiment. The conflict between sentiment and reason was feit acutely by medical students when they had to spend sessions in the postmortem room: some were indeed so upset by the experience and the dread of such intimate contact with the dead that they forsook the study of medicine for something less harrowing. The judge on the bench had in the condemned cell, forgot the justice due to the woman whom the criminal had widowed and the children he had made fatherless. Among teachers, again, there was a growing feeling that the physical punishment of scholars was an unjustifiable form of cruelty. In fact, sentiment asserted itself more and more as a ruling force. The repugnance to eugenic measures

enced by it.

Sir Arthur Keith went on to say that it had been his privilege to know many of those who had advanced the resources of medicine by operations on anesthetized animals, and all had been tender-hearted men, who were convinced that by a present sacrifice of animal life they would make the world better for both man and beast. To watch a surgeon operating would convince anyone that if the patient had been his own child he could not have been more tender and careful. Yet he had heard such men branded as malefactors and criminals. Of all forms of cruelty there were none more diabolical than those which depended upon a wilful misinterpretation of

motive. If there was need for a society to save animals from unnecessary suffering, there was also need for an organization to save scientific men from the cruelty of misrepresentation and injustice. If reason were the sole arbiter in deciding whether or not vivisection was justifiable the public jury of England would long ago have returned a verdict in favor of that society; and if reason could convince its opponents, backed by masses of evidence, they would long ago have been reduced to silence. But reason did not hold the scepter of public opinion, and it was necessary to continue to produce evidence and so enlighten the public. The Research Defense Society also had to do more than defend those who sought to relieve suffering by research, but on occasion it had to take the offensive when it saw the charitable heart of the public being misdirected. In conclusion, he made an allusion to Stephen Paget, the founder of the society, who in his "Confesso Medici" revealed some of the mental conflicts he had endured before he found his real mission in life in the defense of research as the true handmaid of medical progress. In the pursuit of the society's aims no labor was too arduous for Paget, for the great cause of the relief of suffering through research carried him triumphantly onward. Sir Arthur also paid a generous tribute to the late Lord Knutsford.

Sir Arthur Stanley, in proposing a vote of thanks to Sir Arthur Stanley, in proposing a vote of thanks to Sir Arthur Keith, said that he felt more than ever sure

Sir Arthur Stanley, in proposing a vote of thanks to Sir Arthur Keith, said that he felt more than ever sure, after Sir Arthur's eloquent words, that the society was right in its aims.

Lord Moynihan, in seconding, said that Sir Arthur concealed under a very distinguished Scottish name and the remnants of a Scottish accent both a Hibernian mind and a Hibernian personality. He traced the steps in their lecturer's career from the time he was anatomist at the London Hospital to his present position, remarking that he had created the Department of Anthropology in the Royal College of Surgeons, and had made it one of the College's greatest achievements.—British Medical Journal.

# CLINIC ORDINANCE OF SAN FRANCISCO\*

### Defining Clinics and Dispensaries and Providing for the Operation, Maintenance, and Licensing Thereof

(Code No. 17.10)

Bill No. 123, Ordinance No. 17.101, as follows:

Be it ordained by the People of the City and County of San Francisco as follows:

San Francisco as follows:

Section 1. For the purpose of this ordinance a dispensary or clinic or other designation of like interpretation is declared to be a person, place, establishment, corporation, institution, association or agent whose purpose it is, either independently or in connection with any other purpose, to furnish at any place or places, either without charge or for part pay or full pay, medical and/or surgical or dental treatment or advice, or medicine or apparatus, or drugless healing or manipulation, or mental and habit advice and treatment which will include psychiatric and neurological advice, mental healing and faith cures of all types, to any person or persons nonresident, or ambulatory therein, who are suffering from or afflicted with bodily and/or mental infirmities or ailments of any kind whatsoever.

None of the provisions of this ordinance shall apply to what is known as the private practice of medicine or any other curative or remedial system.

Section 2. It shall be unlawful for any person, place, establishment, corporation, institution, association or agent to open, conduct, manage or maintain any dispensary or clinic as above defined within the corporated limits of the City and County of San Francisco without first obtaining a permit and license therefor as hereinafter provided, and said license shall not be granted without a permit first being had and obtained.

Every person, firm or corporation conducting a clinic or dispensary as herein defined shall pay a license fee of six (\$6) dollars per quarter.

six (\$6) dollars per quarter.

Section 5. Any person, place, establishment, corporation, institution, association or agent desiring such license shall make written application therefor to the Director of Public Health, in conformation with the general provisions of this ordinance relating to applications for licenses, and shall truly state in said application the location or proposed location of such dispensary, the purpose for which it is or is to be opened, conducted and maintained, the accommodations or proposed accommodations for patients which it shall contain, the nature and kind of treatment given or proposed to be given therein, and the name and addresses of the person or persons making the application and the names of the person or persons who are conducting or will conduct said dispensary or clinic, stating their training and qualifications for conducting such dispensary or clinic.

<sup>\*</sup>For editorial comments, see page 123.

It shall be the duty of the Director of Public Health, upon the presentation of such application, to make or cause to be made strict inquiry into the facts set out in such application, and if upon such inquiry he shall find such dispensary or clinic is or is intended to be so constructed and equipped as to afford proper accommodations for the care of persons treated or proposed to be treated therein, and that the person or persons or intended person or persons responsible for the maintenance and conduct of said dispensary or clinic, and the person or persons actually conducting the care given to patients as defined in this ordinance fulfill the requirements defined by this ordinance, and if in the Director's opinion it is for the public's benefit, and the rules and regulations and minimum standards provided for in this ordinance are being carried out, then the Director of Public Health shall issue a permit therefor.

Section 4. It shall be the duty of the Director of Pub-

Section 4. It shall be the duty of the Director of Public Health to establish rules, regulations and minimum standards for the establishment, operation and management of dispensary or clinic so licensed and to approve the methods of collecting funds from the public, and regulating the purposes and objects to which said funds are

the methods of collecting funds from the public, and regulating the purposes and objects to which said funds are Section 5. The Director of Public Health or authorized assistant may at any or all times visit and inspect the dispensary or clinic. He may examine all matters in relation to said dispensary and clinic and ascertain how far they are conducted in compliance with the rules and regulations and minimum standards laid down by him. After due notice to a dispensary, and opportunity for it to be heard, the Director of Public Health may, if public interest demands, and for just and reasonable cause, revoke a license by written order. Such an order shall state the reason for revoking such license, and the time at which such revocation shall take effect and when, at the discretion of the Director of Public Health, the activities of the dispensary or clinic may be resumed.

Section 6. Any person, place, establishment, corporation, institution, association or agent advertising or maintaining a clinic or dispensary as defined in this ordinance without first having obtained a license therefor as provided in this ordinance or after revocation of such license under the authority conferred by this ordinance to the Director of Public Health, shall be guilty of a misdemeanor, and on conviction thereof shall be punished by a fine of not less than \$10 and not more than \$200 for each offense.

Section 7. Any person or persons who wilfully violate any of the provisions of this ordinance or do not carry out the rules and regulations and minimum standards laid down by the Director of Public Health shall be guilty of a misdemeanor, and on conviction thereof shall be punished by a fine of not less than \$10 and not more than \$200.

Section 8. Any person or persons who obtain medical or surgical care or other treatment of whatever kind from a licensed dispensary or clinic on false representation shall be guilty of a misdemeanor, and on conviction thereof shall be punished by a fine of not less than \$10 and not more than \$200.

 $\it Section~9.~$  All ordinances or parts thereof in conflict herewith are hereby repealed.

#### ADDENDA-TWO DEFINITIONS OF A "CLINIC"

In the editorial comments concerning the San Francisco clinic ordinance, reference was made to a tentative draft of a proposed state clinic ordinance which was formulated several years ago by the Advisory Medical Board of the Health Department of the County of Los Angeles. Two of the tentative definitions which were then formulated are here printed.

Section I. For the purpose of this act, a dispensary is defined to be any place or establishment not conducted for profit where medical or surgical advice or treatment for any ailment, deformity, disease, disorder, or injury or other physical condition of any person is furnished or where therapeutic apparatus is used on or furnished to persons not resident therein, or any place or establishment whether conducted for charitable purposes or profit and advertised, announced, conducted or maintained under the name "dispensary," "health center," "clinic" or other designation of like import.

Section 1. For the purpose of this article, a clinic or dispensary or health center or health association or organization with designation of similar import, is defined as any institution or establishment, public or private, whose purpose it is, whether independently or in connection with any other purpose, directly or indirectly, to give advice, diagnosis, or treatment bearing upon the physical or mental health of individuals nonresident therein. Provided that the offices used for private practice by a licensed practitioner of any mode of healing the sick or injured, and who is properly licensed in California; and that any offices or rooms used exclusively for healing by any form of prayer or religious practice shall not be deemed to come within the meaning of the above definition.

## TWENTY-FIVE YEARS AGO\*

### EXCERPTS FROM OUR STATE MEDICAL **JOURNAL**

Vol. V. No. 8, August 1907

From some editorial notes:

The Supreme Court and the Arwine Case .-James T. Arwine brought suit against the Board of Medical Examiners, along in the latter part of last year, to compel them to issue to him a license to practice medicine in this state, the board having refused to grant such license for the reason that the credentials of preliminary and medical education of the plaintiff did not comply with the standards required under the act regulating the practice of medicine. . . .

.. The whole case really hinged upon that provision of the law which fixes the requirement of a medical college whose diplomas may be recognized by our Board of Medical Examiners. In order that the whole matter may be clearly before you, it seems well to make some extracts from the decision of the Supreme Court, in bank, July 8, 1907. . . .

... The foregoing decision is signed by Angellotti and concurred in by Shaw, Sloss, Henshaw, Lorigan, and McFarland. Now let us cease from this overripe anxiety about the constitutionality of the Medical Practice Act. Every essential part of it has been pronounced constitutional. . . .

From an article on "The Intensity of the Pulmonic Sound in Mitral Incompetence" by William Watt Kerr, M.D.

... The statement is generally made that in cases of mitral incompetence the pulmonic sound is accentuated so long as compensation exists, and in nearly every textbook this change in the second cardiac sound is mentioned as occurring with such regularity as to constitute one of the physical signs diagnostic of mitral regurgitation. My own experience has been such as to make me doubt whether this changed second sound occurs with such frequency as to warrant us in attributing such a constant value to it. . . .

From an article on "The X-Rays as a Therapeutic Factor in Dermatology" by D. Friedlander, M.D., San Francisco.

The credit of the first attempt at utilization of the roentgen rays as a method of treatment in dermatology must be accorded to Freund of Vienna, who, in 1900, attempted to treat a case of pigmented nevus pileferous which resisted the ordinary methods of treatment. . .

. . Since then medical literature has been replete with favorable reports on the use of the rays in dermatology, and, at the present date, there can be no doubt as to their therapeutic efficacy.

From an article on "Suggestions on Methods of Attacking Typhoid Fever in San Francisco" by H. A. Ryfkogel, M.D., San Francisco.

It will not be necessary to enter now into a discussion of the etiology of typhoid fever since it may be considered as established, and this paper will deal very briefly with the points by which the disease is carried, the methods to be adopted in studying the present endemic in San Francisco, and finally the means that should be used to prevent the further spread of, and stamp out, the disease.

<sup>\*</sup>This column strives to mirror the work and aims of colleagues who bore the brunt of state society work some twenty-five years ago. It is hoped that such presentation will be of interest to both old and recent members.